

**Application Data Sheet****Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHODS OF REGULATING METABOLISM AND MITOCHONDRIAL FUNCTION
Attorney Docket Number::	WIBL-P01-013
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	12
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Vamsi
Middle Name::	Krishna
Family Name::	Mootha
City of Residence::	Brookline
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	80 Monmouth Street.
City of mailing address::	Brookline
State or Province of mailing address::	MA

Postal or Zip Code of mailing address:: 02446

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Family Name:: Altshuler  
City of Residence:: Brookline  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of mailing address::  
City of mailing address:: Brookline  
State or Province of mailing address:: MA

#### **Correspondence Information**

Correspondence Customer Number:: 28120

#### **Representative Information**

Representative Customer Number:: 28120

#### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	US04/019017	06/14/04
US04/019017	An application claiming benefit under 35 USC 119(e)	60/478238	06/13/03
US04/019017	An application claiming benefit under 35 USC 119(e)	60/525548	11/26/03
US04/019017	An application claiming benefit under 35 USC 119(e)	60/559141	04/02/04

**Assignee Information**

Assignee name::	Whitehead Institute for Biomedical Research
Street of mailing address::	Nine Cambridge Center
City of mailing address::	Cambridge
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	01242-1479